

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 16, 2000 8:00 am**  
**Secretary of State**

02-16-2000 90030 023 \*\*\*150.00

**DOCUMENT # 467253**

1. Entity Name

**TOROW CONSTRUCTION, INC.**

Principal Place of Business

Mailing Address

2694 NE SEAWALL'S LANDING WAY  
 P. O. BOX 188  
 JENSEN BCH FL 34957  
 US

2694 NE SEAWALL'S LANDING WAY  
 JENSEN BCH FL 34957  
 US

00014440



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3309 LINDA DR.  
 Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 188  
 Suite, Apt. #, etc.

City & State

JENSEN BCH, FL.

City & State

JENSEN BCH, FL.

4. FEI Number

59-1578802

Applied For

Not Applicable

Zip

Country

34957

MARTIN

Zip

Country

34958

MARTIN

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TILTON, C. N.  
 1936 RICOV TERR  
 JENSEN BEACH FL 33457

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TOROW, FRANK 2694 NE SEWALLS LANDING WAY JENSEN BEACH FL 34957 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TOROW, BETTY 2694 NE SEWALLS LANDING WAY JENSEN BEACH FL 34957 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Frank Torow*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-29-00  
 Date

561-286-1326  
 Daytime Phone #

CR2E034 (9/99)